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17. There is evidence that among women, as among men, external factors influence the strength showing. The workers in a similar environment tend, as a group, to vary in the same direction from day to day.

18. Among women, as among men, demonstrable fatigue is more manifest in weaker workers than in stronger. The most pronounced indications of fatigue are presented in an operation requiring close concentration and carried on in a disagreeable environment.

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#### NEW YORK LAW RELATING TO CARE OF TUBERCULOUS PATIENTS.

A New York law (chapter 900, approved May 21, 1920) provides for the listing and recommendation by the State commissioner of health of private institutions and dwellings found suitable for the board and lodging of tuberculous patients, and further provides for State aid to tuberculous patients, not bedridden, who are unable to pay either in whole or in part for such board and lodging. The law reads as follows:

SECTION 1. The health officers of any city, town, or village in the State shall have power to certify to the State department of health such private institutions or dwellings within their jurisdiction as may be suitable and desirable for the board and lodging of tuberculous patients. If such institutions and dwellings or any others be deemed by the commissioner of health of the State of New York to be suitable for such purposes, such commissioner shall, with the consent of the owners or lessees of such institutions or dwellings, make a list thereof and recommend the same for the care of tuberculous patients as hereinafter provided. The district supervisors of the State department of health shall file quarterly with the department of health of the State of New York a certificate containing a statement of the condition of such institutions or dwellings in so far as concerns sanitation, and any other matter bearing upon their suitability for the medical treatment and care of tuberculous patients.

SEC. 2. Any tuberculous patient who is a citizen and has been for one year a resident of the county in which such application is filed may make application for State aid as provided for in this act. Such patient shall file with the health officer of the village, town, or city in which he may reside a statement of his financial condition, setting forth that he requires public aid. If upon investigation by representatives of the State department of health or of a local health officer, it is found that such

person is in fact suffering from tuberculosis such health officer shall immediately transmit such application to the commissioner of health of the State. If the commissioner of health shall consider the applicant a proper subject for State aid, the applicant shall be admitted to board and lodging in one of the institutions or dwellings listed as hereinbefore provided. Such applicant may reside in such institutions or dwellings for such period as in the judgment of the supervisors of the State or city department of health may be deemed necessary. One-third of the expense of boarding and lodging of such applicant shall be borne by the applicant himself, and if appropriation be made therefor the balance by the county in which such applicant resides; except that, in the case of applicants financially unable to pay, the county shall bear the entire expense thereof.

A fixed and uniform rate of payment for board and lodging shall be prescribed by the State department of health, except that the rate of payment shall be determined by the city department of health and the commissioner of health as to patients residing in cities of the first class. The health officer of the city, town, or village shall monthly, in advance, collect from each person residing within their respective districts who is boarded and lodged hereunder, except such whom the health officer of the city, town, or village shall find to be financially unable to pay such expense, one-third of the expense of boarding and lodging of each such patient and pay the same into the county treasury. The board of estimate and apportionment of the city of New York shall, and the board of aldermen, common council, board of supervisors, or, as the case may be, such board or body in the respective cities, towns, and villages of the State as may have power to appropriate money for the use of such city, town, or village, may appropriate and include in the annual budget or other estimate of expenditures the funds necessary to pay the charges imposed by this act and shall include the amount in the tax levy succeeding such appropriation. Such health officer of the city, town, or village shall at monthly intervals pay over to the owners, lessees, or managers of such institutions or dwellings the expense of boarding and lodging each such patient as may be therein lodged and boarded. The district supervisor of the State department of health or of any city department of health shall be required to make visits to institutions or dwellings where tuberculous patients board at sufficiently frequent intervals so as to report upon violations of standards for sanitation and care of the patient and such regulations which shall be established by the State department of health in conformity and in accordance with this act. The failure of any owner, lessee, or manager of an institution or dwelling house in which a tuberculous patient boards to maintain such standards as are prescribed by the State department of health for the conduct of such establishments shall result in the revocation of the certificate to board tuberculous patients issued to such institutions or dwellings. If the district supervisor of the State or city department of health finds that the patient who is admitted to board in such institutions or dwellings fails to comply with reasonable rules and regulations established by the State department of health to govern his conduct and personal hygiene, such patient shall thereupon forfeit the right to further benefits under this act. The district supervisors of the State or city department of health, or official representatives properly delegated by them, shall be required to visit institutions or dwellings in which tuberculous patients are boarded under the terms of this act to give such advice and medical treatment as may be necessary in each individual case. They shall also be required to instruct the patients and the owners, managers, lessees, and the families of the latter as to the methods for the prevention of the spread or transmission of tuberculosis. Under the terms of this act the benefits herein enumerated shall be given only to those tuberculous individuals who are not bedridden and who do not require bedside nursing or special care.

SEC. 3. The State department of health is empowered to provide for emergency medical or nursing care.

SEC. 4. The sum of \$10,000, or so much thereof as may be necessary, is hereby appropriated out of any moneys in the treasury not otherwise appropriated, to defray the expenses of the department of health in performing the duties imposed by this act and for the purpose of carrying out the other provisions of this act, payable by the treasurer on the warrant of the comptroller on the certificate of the commissioner of health or the health officer of the city, town, or village as the case may be, as hereinbefore provided.

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## PHYSICIAN PERMITTED TO DISCLOSE EXISTENCE OF COMMUNICABLE DISEASE TO PROTECT OTHERS.

The following abstract of a court decision is quoted from the advance sheets of the Northeastern Reporter, issue of July 27, 1920:

"A stranger, staying at a small hotel, becoming afflicted with sores on his body, went to the family physician of the hotel keeper who also acted as hotel doctor, who, after making a physical examination, informed him that he believed the disease to be syphilis, although it would be impossible to be positive without making certain Wassermann tests. He told the patient of the danger of communicating the disease at the hotel, and requested him to leave the next day, which he promised to do.

"While making a professional call at the hotel the next day, the doctor learned that the guest had not left, whereupon he told the proprietor that he thought plaintiff was afflicted with a contagious disease, and advised that certain precautions be taken. His belongings were put in the hallway, his room was fumigated, and he was forced to leave. He thereafter brought action against the physician, contending that the law absolutely prohibited the disclosure of any confidential communications by the physician at any time or under any circumstances, and that a breach of the duty of secrecy by defendant gave rise to a cause of action in favor of plaintiff."

The Supreme Court of Nebraska in *Simonsen v. Swenson*, 177 N. W. 831, held that the physician was not liable.

"Commissioner Flansburg in the opinion, which was adopted by the court, in discussing a physician's duty relative to professional secrecy, said:

" 'No patient can expect that if his malady is found to be of a dangerously contagious nature he can still require it to be kept secret from those to whom, if there was no disclosure, such disease would be transmitted. The information given to a physician by his patient, though confidential, must, it seems to us, be given and received subject to the qualification that if the patient's disease is found to be of a dangerous and so highly contagious or infectious a nature that it will necessarily be transmitted to others unless the danger of contagion is disclosed to them, then the physician should, in that event, if no other means of protection is possible, be privileged to make so much of a disclosure to such persons as is necessary to prevent the spread of the disease. A disclosure in such case would, it follows, not be a betrayal of the confidence of the patient, since the patient must know, when he imparts the information or subjects himself to the examination, that, in the exception stated, his disease may be disclosed.' "